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| APPLICATION NO.   | FILING DATE  |   | FIRST NAMED INVENTOR  |   | ATTO  | RNEY DOCKET NO.   | CONFIRMATION NO.  |  |
| 10/601,652 06/24/2003   |  | Masatoshi Yokota  | Yokota 0754-0192P 1286  |   | 1286  |   |   |  |
| TITLE OF INVENTION  | GOLF BALL  |   |   |   |   |   |   |  |
|   |  |   |   |   |   |   |   |  |
| Towns I   | SMALL ENTITY   | ISSUE FEE DUE   | PUBLICATION FEE D   | UE PREV. PA   | ID ISSUE FEE  | TOTAL FEE(S) DUE  | DATE DUE  |  |
| APPLN. TYPE   |  |   | \$300   |   | \$0   | \$1810  | 01/21/2010  |  |
| nonprovisional  | NO   | \$1510<br>ART UNIT  | CLASS-SUBCLASS  |   | 30 \$1010 CH21/2010                                       |   |   |  |
|   |  |   |   |   |   |   |   |  |
| •   | 63). (1) the names of up to 3 registered patent attorneys  |   |   |   |   |   |   |  |
|   |  |   |   |   |   |   |   |  |
|   | R 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The Address form PTO/SB/122) attached.  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 and 3 an |   |   |   |   |   |   |  |
| During Address! ind   | ication (or "Fee Address   | " Indication form   | receiptered attorney  | or agent) and   | the names of 1  | an to   |   |  |
| PTO/SB/47; Rev 03-0<br>Number is required.  | 2 registered patent attorneys or agents. If no name is 3   |   |   |   |   |   |   |  |
| 3. ASSIGNEE NAME A  | ND RESIDENCE DAT.  | A TO BE PRINTED ON  | THE PATENT (print o   | r type)   |   |   |   |  |
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|   |  |   | (B) RESIDENCE: (CITY and STATE OR COUNTRY)  |   |   |   |   |  |
| PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the do recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  SRI SPORTS LIMITED  Kobe, JAPAN |  |   |   |   |   |   |   |  |
|   | SRI SPORTS LIMITED Kobe, JAPAN   |   |   |   |   |   |   |  |
| Please check the appropr  | iate assignee category o   | r categories (will not be p   |   |   |   |   |   |  |
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| a. Applicant claim  | □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). ed from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in k Office.  |   |   |   |   |   |   |  |
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